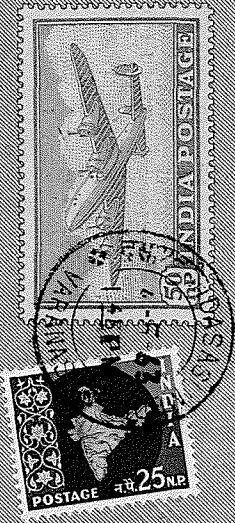


BY AIR MAIL

हवाई पत्र

AEROGRAMME

NO ENCLOSURES
ALLOWED



Timothy Leary
23 Fenwood Avenue
Boston Centre
Mass.
U.S.A.

Coast - 56

Third fold here

Albuquerque
New Mexico
U.S.A.

Sender's name and address:-

To open cut here

Center for Research in Personality
5 Divinity Avenue
Cambridge 38, Massachusetts

Psilocybin Evaluation Study

Name OLSON, CHARLES Age 50 Sex M
Occupation Post

1. When did you first take psilocybin (or similar substances) in our project? (month and year) November, 1960

2. How many times have you taken psilocybin (or similar substance) altogether? Three - 2nd time February, 1961

3. Did your experience(s) with psilocybin (or other) bring about any lasting effects on your life?

Lasting Negative Effects	No Effects	Minor Positive Effects	Important Positive Effects	Profound or Amazing Posi- tive Effects
/	/	/	/	/

4. Have you noticed any lasting physical effects? YES NO ✓

5. If yes, please specify:

6. Have you noticed any changes in your ability to do productive work?

Much Worse	Somewhat Worse	No Change	A Little Better	Much Better
/	/	/	/	/

7. Specify the nature of the changes. If possible give concrete details or examples. Feel free to distinguish different aspects of work, e.g. efficiency, creativity, industry.

8. Have you noticed changes in your relations with work-associates or colleagues?

Much
Worse

Somewhat
Worse

No
Change

A Little
Better

Much
Better



9. Specify the nature of the changes, who was involved, and give specific details and examples.

Exactly the Long House Advantage of a
Psilocybin Session: that each
thing & person is exactly what
they in fact are

10. Have there been any changes in your relations with any member of your family?

YES _____ NO ✓

11. If yes, specify which member of your family you are referring to, what the nature of the changes are, and how you feel about these changes.

12. Have there been any changes in your relationships with members of the opposite sex?

No

13. If yes, specify the nature of the changes, giving concrete examples if possible. Also, are the changes specific to one person or are they generalized?

14. Has your feeling toward religion changed?

More
Negative

Negative

No
Change

Mildly
Positive

Very
Positive

15. Specify the nature of the changes. Are they solely in attitude or feeling, or do they involve changes in overt behavior (e.g. church-going, praying). Is there any change in your relation to the divine or the transcendental?

16. Have you had any emotional or nervous disturbances as a result of the psilocybin experience?

None

17. If yes, please specify.

18. Have there been any changes (positive or negative) in your general outlook on life or sense of well-being? Please be specific.

No. This need be said though:
 psilocybin is The Truth Pill,
 and taken in session creates
 The Love Feast. It is therefore
 confirmatory, and as such,
 because it is so substantive
 & 'mechanical' [in the sense it
 brings the autonomic nervous
 system directly into play]
 incredibly valuable supportive
 experience.

It is therefore should be
 available to anyone,
 and especially in session use.

Charles Olson
 May 1, 1962

Center for Research in Personality
5 Divinity Avenue
Cambridge 38, Massachusetts

Psilocybin Evaluation Study - Report of Spouse, Fiancé, or Friend

In our research we need the independent observations of a close and sympathetic witness, in order to corroborate certain changes that people have reported as a result of their psilocybin experience.

Will you please help us by completing this questionnaire.

Your Name Betty Olson Age 36 Sex F
Occupation SPOUSE
Name of Subject CHARLES OLSON
Your Relationship to Subject SPOUSE

1. Have you ever taken psilocybin or similar substances?

YES _____ NO ✓

2. If yes, please give details. Was it on our project?

3. Have you noticed any lasting effects on the life of the subject?

Lasting
Negative
Effects

No
Effects

Minor
Positive
Effects

Important
Positive
Effects

Profound or
Amazing Posi-
tive Effects

/ / / / /

4. Have you observed any lasting physical effects on the subject?

YES _____ NO ✓

5. If yes, please specify:

6. Have you noticed any changes in his ability to do productive work?

Much
Worse

Somewhat
Worse

No
Change

A Little
Better

Much
Better

/ / (1) / /

7. Specify the nature of the changes. If possible give concrete details or examples. Feel free to distinguish different aspects of work, e.g. efficiency, creativity, industry.

8. Have you noticed changes in his or her relations with work-associates or colleagues?

Much
Worse

Somewhat
Worse

No
Change

A Little
Better

Much
Better

/ / (1) / /

9. Specify the nature of the changes, who was involved, and give specific details and examples.

10. Have there been any changes in his or her relations with any member of his or her family?

YES _____ NO 1

11. If yes, specify which member(s) of his or her family you are referring to, what the nature of the changes are, and how you feel about these changes.

12. Have there been any changes in his or her relationships with members of the opposite sex?

13. If yes, specify the nature of the changes, giving concrete examples if possible. Also, are the changes specific to one person or are they generalized?

14. Have you noticed any changes in the subject's feeling toward religion?

More Negative	Negative	No Change	Mildly Positive	Very Positive
/	/	(1)	/	/

15. Specify the nature of the changes. Are they solely in attitude or feeling, or do they involve changes in overt behavior (e.g. churchgoing, praying). Is there any change in the relation to the divine or transcendental?

16. Have you noticed any emotional or nervous disturbances as a result of the psilocybin experience?

17. If yes, please specify.

18. Have there been any changes (positive or negative) in the subject's general outlook on life or sense of well-being? Please be specific.

19. What are your feelings about psilocybin as a result of your contact with the subject? Would you like to take psilocybin?

YES